



ANNUAL STATEMENT  
FOR THE YEAR ENDING DECEMBER 31, 2010  
OF THE CONDITION AND AFFAIRS OF THE

Envision Insurance Company

NAIC Group Code	00000	(Current Period)	,	00000	(Prior Period)	NAIC Company Code	12747	Employer's ID Number	20-4308924
Organized under the Laws of	Ohio				State of Domicile or Port of Entry	Ohio			
Country of Domicile	United States								
Licensed as business type:	Life, Accident & Health [ X ]			Property/Casualty [ ]			Hospital, Medical & Dental Service or Indemnity [ ]		
	Dental Service Corporation [ ]			Vision Service Corporation [ ]			Health Maintenance Organization [ ]		
	Other [ ]			Is HMO, Federally Qualified? Yes [ ] No [ ]					
Incorporated/Organized	02/08/2006				Commenced Business	01/01/2007			
Statutory Home Office	2181 East Aurora Road				Twinsburg, OH 44087				
	(Street and Number)				(City, State and Zip Code)				
Main Administrative Office	2181 East Aurora Road				330-405-8089				
	Twinsburg, OH 44087				(Area Code) (Telephone Number)				
	(City, State and Zip Code)								
Mail Address	2181 East Aurora Road				Twinsburg, OH 44087				
	(Street and Number or P.O. Box)				(City, State and Zip Code)				
Primary Location of Books and Records	2181 East Aurora Road				330-405-8089				
	Twinsburg, OH 44087				(Area Code) (Telephone Number) (Extension)				
	(City, State and Zip Code)								
Internet Web Site Address	www.envisionrxplus.com								
Statutory Statement Contact	Edwin Jenaro Alicea				330-486-6377				
	(Name)				(Area Code) (Telephone Number) (Extension)				
	ealicea@rxoptions.net				330-486-4801				
	(E-Mail Address)				(Fax Number)				

OFFICERS

Name	Title	Name	Title
Kevin Michael Nagle	President	Catherine Hoagland Strautman	Executive Vice President
Kimberly Sue Kirkbride	Treasurer	Eugene Paul Samuels	Secretary

OTHER OFFICERS

Barry Irwin Katz R. Ph.	Chief Operating Officer
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DIRECTORS OR TRUSTEES

Kevin Michael Nagle	Catherine Hoagland Strautman	Barry Irwin Katz R. Ph.	Kimberly Sue Kirkbride
Eugene Paul Samuels JD			

State of Ohio.....  
County of Summit.....  
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The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions* and *Accounting Practices* and *Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Kevin Michael Nagle President	Catherine Hoagland Strautman Executive Vice President	Kimberly Sue Kirkbride Treasurer
Subscribed and sworn to before me this day of ,		a. Is this an original filing? Yes [ X ] No [ ] b. If no: 1. State the amendment number 0 2. Date filed 3. Number of pages attached

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EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
NONE						
0799999 Gross health care receivables	0	0	0	0	0	0

**EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

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## ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

## EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
NONE							
0199999 Individually listed receivables	0	0	0	0	0	0	0
0299999 Receivables not individually listed							
0399999 Total gross amounts receivable	0	0	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

## EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

## EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups .....	0	0.0		0.0		
2. Intermediaries .....	0	0.0		0.0		
3. All other providers .....	0	0.0		0.0		
4. Total capitation payments .....	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service .....	0	0.0	XXX	XXX		
6. Contractual fee payments .....	0	0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service .....	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments .....	0	0.0	XXX	XXX		
9. Non-contingent salaries .....	0	0.0	XXX	XXX		
10. Aggregate cost arrangements .....	0	0.0	XXX	XXX		
11. All other payments .....	94,479,096	100.0	XXX	XXX	94,479,096	
12. Total other payments .....	94,479,096	100.0	XXX	XXX	94,479,096	0
13. Total (Line 4 plus Line 12)	94,479,096	100 %	XXX	XXX	94,479,096	0

## EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

[illegible]

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment .....						
2. Medical furniture, equipment and fixtures .....						
3. Pharmaceuticals and surgical supplies .....						
4. Durable medical equipment .....						
5. Other property and equipment	302,846		227,134		75,712	
6. Total	302,846	0	227,134	0	75,712	0





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alabama		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	181									181
2. First Quarter .....	145									145
3. Second Quarter .....	142									142
4. Third Quarter .....	143									143
5. Current Year	159									159
6. Current Year Member Months	1,755									1,755
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	288,835									288,835
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	288,835									288,835
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	354,226									354,226
18. Amount Incurred for Provision of Health Care Services	353,355									353,355

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....288,835



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alaska		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	17									17
2. First Quarter .....	15									15
3. Second Quarter .....	16									16
4. Third Quarter .....	17									17
5. Current Year	17									17
6. Current Year Member Months	193									193
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	22,267									22,267
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	22,267									22,267
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	34,557									34,557
18. Amount Incurred for Provision of Health Care Services	34,748									34,748

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....22,267



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Arizona		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	151									151
2. First Quarter .....	135									135
3. Second Quarter .....	137									137
4. Third Quarter .....	141									141
5. Current Year	142									142
6. Current Year Member Months	1,650									1,650
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	211,606									211,606
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	211,606									211,606
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	292,888									292,888
18. Amount Incurred for Provision of Health Care Services	295,533									295,533

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....211,606

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ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Arkansas		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	.61									.61
2 First Quarter .....	.52									.52
3 Second Quarter .....	.51									.51
4. Third Quarter .....	.55									.55
5. Current Year	59									59
6 Current Year Member Months	646									646
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	88,614									88,614
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	88,614									88,614
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	136,044									136,044
18. Amount Incurred for Provision of Health Care Services	126,076									126,076

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....88,614



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF California DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	938									938
2 First Quarter .....	926									926
3 Second Quarter .....	971									971
4. Third Quarter .....	1,025									1,025
5. Current Year	1,050									1,050
6 Current Year Member Months	11,791									11,791
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	1,578,753									1,578,753
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	1,578,753									1,578,753
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	1,920,099									1,920,099
18. Amount Incurred for Provision of Health Care Services	1,891,568									1,891,568

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....1,578,753



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Colorado	DURING THE YEAR 2010										NAIC Company Code      12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
		2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year .....	138										138
2. First Quarter .....	118										118
3. Second Quarter .....	115										115
4. Third Quarter .....	126										126
5. Current Year	128										128
6. Current Year Member Months	1,441										1,441
Total Member Ambulatory Encounters for Year:											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	178,590										178,590
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	178,590										178,590
16. Property/Casualty Premiums Earned.....	0										
17. Amount Paid for Provision of Health Care Services .....	243,292										243,292
18. Amount Incurred for Provision of Health Care Services	238,189										238,189

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....178,590



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Connecticut		DURING THE YEAR 2010					NAIC Company Code	12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	1,821									1,821
2. First Quarter .....	173									173
3. Second Quarter .....	164									164
4. Third Quarter .....	146									146
5. Current Year	152									152
6. Current Year Member Months	1,968									1,968
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	239,298									239,298
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	239,298									239,298
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	391,922									391,922
18. Amount Incurred for Provision of Health Care Services	286,210									286,210

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....239,298



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Delaware		DURING THE YEAR 2010					NAIC Company Code	12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	609									609
2. First Quarter .....	92									92
3. Second Quarter .....	82									82
4. Third Quarter .....	78									78
5. Current Year	77									77
6. Current Year Member Months	1,023									1,023
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	107,933									107,933
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	107,933									107,933
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	184,702									184,702
18. Amount Incurred for Provision of Health Care Services	155,732									155,732

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....107,933

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ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF District of Columbia		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	640									640
2. First Quarter .....	31									31
3. Second Quarter .....	25									25
4. Third Quarter .....	23									23
5. Current Year	22									22
6. Current Year Member Months	324									324
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	35,125									35,125
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	35,125									35,125
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	70,732									70,732
18. Amount Incurred for Provision of Health Care Services	40,734									40,734

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....35,125



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION		Envision Insurance Company				2. _____					(LOCATION)	
NAIC Group Code	00000	BUSINESS IN THE STATE OF Florida			DURING THE YEAR 2010			NAIC Company Code			12747	
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
		2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year .....		752								752		
2. First Quarter .....		18,751								18,751		
3. Second Quarter .....		40,027								40,027		
4. Third Quarter .....		45,227								45,227		
5. Current Year		49,246								49,246		
6. Current Year Member Months		411,393								411,393		
Total Member Ambulatory Encounters for Year:												
7. Physician .....		0										
8. Non-Physician .....		0										
9. Total		0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred		0										
11. Number of Inpatient Admissions		0										
12. Health Premiums Written (b).....		39,508,428								39,508,428		
13. Life Premiums Direct.....		0										
14. Property/Casualty Premiums Written.....		0										
15. Health Premiums Earned.....		39,508,428								39,508,428		
16. Property/Casualty Premiums Earned.....		0										
17. Amount Paid for Provision of Health Care Services .....		30,591,384								30,591,384		
18. Amount Incurred for Provision of Health Care Services		31,928,527								31,928,527		

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....39,508,428



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Georgia		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	289									289
2. First Quarter .....	257									257
3. Second Quarter .....	263									263
4. Third Quarter .....	275									275
5. Current Year	298									298
6. Current Year Member Months	3,214									3,214
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	473,151									473,151
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	473,151									473,151
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	539,334									539,334
18. Amount Incurred for Provision of Health Care Services	542,366									542,366

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....473,151



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Hawaii		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	18									18
2 First Quarter .....	21									21
3 Second Quarter .....	26									26
4. Third Quarter .....	28									28
5. Current Year	30									30
6 Current Year Member Months	312									312
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	36,552									36,552
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	36,552									36,552
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	56,553									56,553
18. Amount Incurred for Provision of Health Care Services	57,279									57,279

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....36,552



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Idaho      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	67									67
2 First Quarter .....	64									64
3 Second Quarter .....	64									64
4. Third Quarter .....	63									63
5. Current Year	63									63
6 Current Year Member Months	767									767
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	97,778									97,778
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	97,778									97,778
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	140,778									140,778
18. Amount Incurred for Provision of Health Care Services	139,437									139,437

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....97,778



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	388									388
2. First Quarter .....	318									318
3. Second Quarter .....	322									322
4. Third Quarter .....	312									312
5. Current Year	313									313
6. Current Year Member Months	3,814									3,814
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	526,246									526,246
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	526,246									526,246
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	672,859									672,859
18. Amount Incurred for Provision of Health Care Services	664,375									664,375

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....526,246



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Indiana      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	372									372
2. First Quarter .....	311									311
3. Second Quarter .....	312									312
4. Third Quarter .....	338									338
5. Current Year	338									338
6. Current Year Member Months	3,886									3,886
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	520,596									520,596
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	520,596									520,596
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	683,480									683,480
18. Amount Incurred for Provision of Health Care Services	672,748									672,748

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....520,596



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Iowa      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	90									90
2 First Quarter .....	66									66
3 Second Quarter .....	70									70
4. Third Quarter .....	71									71
5. Current Year	71									71
6 Current Year Member Months	836									836
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	113,971									113,971
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	113,971									113,971
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	147,547									147,547
18. Amount Incurred for Provision of Health Care Services	148,533									148,533

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....113,971





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Kansas		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	197									197
2. First Quarter .....	145									145
3. Second Quarter .....	147									147
4. Third Quarter .....	147									147
5. Current Year	150									150
6. Current Year Member Months	1,761									1,761
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	231,486									231,486
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	231,486									231,486
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	336,593									336,593
18. Amount Incurred for Provision of Health Care Services	333,970									333,970

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....231,486



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	93									93
2 First Quarter .....	114									114
3 Second Quarter .....	125									125
4. Third Quarter .....	141									141
5. Current Year	145									145
6 Current Year Member Months	1,526									1,526
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	212,117									212,117
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	212,117									212,117
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	203,649									203,649
18. Amount Incurred for Provision of Health Care Services	212,008									212,008

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....212,117



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Louisiana      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	114									114
2. First Quarter .....	110									110
3. Second Quarter .....	115									115
4. Third Quarter .....	127									127
5. Current Year	144									144
6. Current Year Member Months	1,449									1,449
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	204,511									204,511
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	204,511									204,511
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	258,223									258,223
18. Amount Incurred for Provision of Health Care Services	258,799									258,799

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....204,511



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Maine      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	44									44
2 First Quarter .....	40									40
3 Second Quarter .....	41									41
4. Third Quarter .....	41									41
5. Current Year	42									42
6 Current Year Member Months	497									497
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	66,436									66,436
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	66,436									66,436
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	70,591									70,591
18. Amount Incurred for Provision of Health Care Services	73,983									73,983

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....66,436



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	2,928									2,928
2. First Quarter .....	369									369
3. Second Quarter .....	333									333
4. Third Quarter .....	323									323
5. Current Year	314									314
6. Current Year Member Months	4,205									4,205
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	457,128									457,128
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	457,128									457,128
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	688,673									688,673
18. Amount Incurred for Provision of Health Care Services	544,087									544,087

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....457,128



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION		Envision Insurance Company		2. _____		(LOCATION)					
NAIC Group Code	00000	BUSINESS IN THE STATE OF Massachusetts			DURING THE YEAR 2010			NAIC Company Code			12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
		2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year .....		5,538								5,538	
2 First Quarter .....		608								608	
3 Second Quarter .....		587								587	
4. Third Quarter .....		529								529	
5. Current Year		514								514	
6 Current Year Member Months		6,993								6,993	
Total Member Ambulatory Encounters for Year:											
7. Physician .....		0									
8. Non-Physician .....		0									
9. Total		0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred		0									
11. Number of Inpatient Admissions		0									
12. Health Premiums Written (b).....		751,135								751,135	
13. Life Premiums Direct.....		0									
14. Property/Casualty Premiums Written.....		0									
15. Health Premiums Earned.....		751,135								751,135	
16. Property/Casualty Premiums Earned.....		0									
17. Amount Paid for Provision of Health Care Services .....		1,239,119								1,239,119	
18. Amount Incurred for Provision of Health Care Services		940,311								940,311	

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....751,135



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Michigan		DURING THE YEAR 2010					NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
		2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year .....	520									520	
2. First Quarter .....	151									151	
3. Second Quarter .....	154									154	
4. Third Quarter .....	160									160	
5. Current Year	161									161	
6. Current Year Member Months	1,868									1,868	
Total Member Ambulatory Encounters for Year:											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	239,202									239,202	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	239,202									239,202	
16. Property/Casualty Premiums Earned.....	0										
17. Amount Paid for Provision of Health Care Services .....	344,678									344,678	
18. Amount Incurred for Provision of Health Care Services	352,869									352,869	

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....239,202



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	102									102
2. First Quarter .....	98									98
3. Second Quarter .....	101									101
4. Third Quarter .....	100									100
5. Current Year	102									102
6. Current Year Member Months	1,208									1,208
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	162,987									162,987
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	162,987									162,987
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	219,521									219,521
18. Amount Incurred for Provision of Health Care Services	223,031									223,031

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....162,987





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Mississippi		DURING THE YEAR 2010							NAIC Company Code	12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
		2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year .....	114									114		
2. First Quarter .....	102									102		
3. Second Quarter .....	105									105		
4. Third Quarter .....	108									108		
5. Current Year	113									113		
6. Current Year Member Months	1,279									1,279		
Total Member Ambulatory Encounters for Year:												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b).....	169,996									169,996		
13. Life Premiums Direct.....	0											
14. Property/Casualty Premiums Written.....	0											
15. Health Premiums Earned.....	169,996									169,996		
16. Property/Casualty Premiums Earned.....	0											
17. Amount Paid for Provision of Health Care Services .....	201,255									201,255		
18. Amount Incurred for Provision of Health Care Services	202,805									202,805		

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....169,996



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
		Individual	Group							
	Total			Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	233									233
2. First Quarter .....	2,107									2,107
3. Second Quarter .....	2,721									2,721
4. Third Quarter .....	3,202									3,202
5. Current Year	3,626									3,626
6. Current Year Member Months	32,931									32,931
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	3,376,437									3,376,437
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	3,376,437									3,376,437
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	2,833,162									2,833,162
18. Amount Incurred for Provision of Health Care Services	2,973,193									2,973,193

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....3,376,437



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	40									40
2 First Quarter .....	38									38
3 Second Quarter .....	39									39
4. Third Quarter .....	40									40
5. Current Year	42									42
6 Current Year Member Months	473									473
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	57,895									57,895
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	57,895									57,895
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	69,171									69,171
18. Amount Incurred for Provision of Health Care Services	70,302									70,302

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....57,895



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	35									35
2 First Quarter .....	46									46
3 Second Quarter .....	46									46
4. Third Quarter .....	51									51
5. Current Year	54									54
6 Current Year Member Months	585									585
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	76,575									76,575
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	76,575									76,575
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	89,863									89,863
18. Amount Incurred for Provision of Health Care Services	90,529									90,529

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....76,575



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Nevada			DURING THE YEAR 2010			NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	112									112
2 First Quarter .....	87									87
3 Second Quarter .....	98									98
4. Third Quarter .....	105									105
5. Current Year	109									109
6 Current Year Member Months	1,194									1,194
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	149,732									149,732
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	149,732									149,732
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	173,141									173,141
18. Amount Incurred for Provision of Health Care Services	172,595									172,595

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 149,732



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION		Envision Insurance Company					2. _____			
NAIC Group Code 00000		BUSINESS IN THE STATE OF New Hampshire			DURING THE YEAR 2010			(LOCATION) NAIC Company Code 12747		
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	78									78
2 First Quarter .....	60									60
3 Second Quarter .....	60									60
4. Third Quarter .....	60									60
5. Current Year	59									59
6 Current Year Member Months	724									724
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	87,457									87,457
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	87,457									87,457
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	139,217									139,217
18. Amount Incurred for Provision of Health Care Services	137,309									137,309

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....87,457



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	279									279
2 First Quarter .....	8,256									8,256
3 Second Quarter .....	9,393									9,393
4. Third Quarter .....	10,164									10,164
5. Current Year	10,886									10,886
6 Current Year Member Months	112,402									112,402
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	11,966,340									11,966,340
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	11,966,340									11,966,340
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	9,841,536									9,841,536
18. Amount Incurred for Provision of Health Care Services	10,193,946									10,193,946

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....11,966,340



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATIONEnvision Insurance Company

2. (LOCATION)

NAIC Group Code00000BUSINESS IN THE STATE OF New MexicoDURING THE YEAR 2010NAIC Company Code12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	53									53
2 First Quarter .....	43									43
3 Second Quarter .....	44									44
4. Third Quarter .....	46									46
5. Current Year	48									48
6 Current Year Member Months	538									538
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	69,369									69,369
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	69,369									69,369
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	78,413									78,413
18. Amount Incurred for Provision of Health Care Services	74,226									74,226

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....69,369





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF New York DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	340									340
2 First Quarter .....	9,530									9,530
3 Second Quarter .....	12,192									12,192
4. Third Quarter .....	13,946									13,946
5. Current Year	15,513									15,513
6 Current Year Member Months	144,993									144,993
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	14,734,813									14,734,813
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	14,734,813									14,734,813
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	12,196,009									12,196,009
18. Amount Incurred for Provision of Health Care Services	12,814,929									12,814,929

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....14,734,813



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2010 NAIC Company Code 12747

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year .....	576									576
2 First Quarter .....	482									482
3 Second Quarter .....	488									488
4. Third Quarter .....	487									487
5. Current Year	503									503
6 Current Year Member Months	5,874									5,874
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	849,984									849,984
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	849,984									849,984
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	978,182									978,182
18. Amount Incurred for Provision of Health Care Services	973,717									973,717

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....849,984



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF North Dakota		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	12									12
2 First Quarter .....	13									13
3 Second Quarter .....	14									14
4. Third Quarter .....	16									16
5. Current Year	16									16
6 Current Year Member Months	174									174
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	21,897									21,897
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	21,897									21,897
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	34,871									34,871
18. Amount Incurred for Provision of Health Care Services	35,574									35,574

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....21,897



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Ohio	DURING THE YEAR 2010										NAIC Company Code      12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
		2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year .....	482										482
2. First Quarter .....	462										462
3. Second Quarter .....	486										486
4. Third Quarter .....	509										509
5. Current Year	523										523
6. Current Year Member Months	5,885										5,885
Total Member Ambulatory Encounters for Year:											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	758,272										758,272
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	758,272										758,272
16. Property/Casualty Premiums Earned.....	0										
17. Amount Paid for Provision of Health Care Services .....	929,806										929,806
18. Amount Incurred for Provision of Health Care Services	948,891										948,891

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....758,272



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Oklahoma		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	113									113
2. First Quarter .....	160									160
3. Second Quarter .....	171									171
4. Third Quarter .....	177									177
5. Current Year	184									184
6. Current Year Member Months	2,059									2,059
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	248,588									248,588
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	248,588									248,588
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	322,262									322,262
18. Amount Incurred for Provision of Health Care Services	326,010									326,010

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....248,588

29.OK



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Oregon      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	77									77
2 First Quarter .....	61									61
3 Second Quarter .....	63									63
4. Third Quarter .....	66									66
5. Current Year	66									66
6 Current Year Member Months	773									773
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	101,647									101,647
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	101,647									101,647
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	144,453									144,453
18. Amount Incurred for Provision of Health Care Services	141,452									141,452

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....101,647

29. OR



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Pennsylvania		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	324									324
2. First Quarter .....	291									291
3. Second Quarter .....	303									303
4. Third Quarter .....	316									316
5. Current Year	339									339
6. Current Year Member Months	3,687									3,687
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	539,418									539,418
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	539,418									539,418
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	622,961									622,961
18. Amount Incurred for Provision of Health Care Services	632,756									632,756

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....539,418



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Puerto Rico		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	0									
2. First Quarter .....	0									
3. Second Quarter .....	0									
4. Third Quarter .....	0									
5. Current Year	0									
6. Current Year Member Months	0									
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	0									
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	0									
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	0									
18. Amount Incurred for Provision of Health Care Services	0									

NONE

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ \_\_\_\_\_





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Rhode Island      DURING THE YEAR 2010      NAIC Company Code      12747	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	684									684
2. First Quarter .....	50									50
3. Second Quarter .....	47									47
4. Third Quarter .....	46									46
5. Current Year	45									45
6. Current Year Member Months	596									596
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	68,520									68,520
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	68,520									68,520
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	117,324									117,324
18. Amount Incurred for Provision of Health Care Services	78,240									78,240

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....68,520



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code		00000		BUSINESS IN THE STATE OF South Carolina		DURING THE YEAR 2010					NAIC Company Code		12747	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10			
			2	3										
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other			
Total Members at end of:														
1. Prior Year .....		2,103									2,103			
2. First Quarter .....		369									369			
3. Second Quarter .....		372									372			
4. Third Quarter .....		372									372			
5. Current Year		372									372			
6. Current Year Member Months		4,545									4,545			
Total Member Ambulatory Encounters for Year:														
7. Physician .....		0												
8. Non-Physician .....		0												
9. Total		0	0	0	0	0	0	0	0	0	0			
10. Hospital Patient Days Incurred		0												
11. Number of Inpatient Admissions		0												
12. Health Premiums Written (b).....		532,769									532,769			
13. Life Premiums Direct.....		0												
14. Property/Casualty Premiums Written.....		0												
15. Health Premiums Earned.....		532,769									532,769			
16. Property/Casualty Premiums Earned.....		0												
17. Amount Paid for Provision of Health Care Services .....		732,188									732,188			
18. Amount Incurred for Provision of Health Care Services		628,125									628,125			

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....532,769



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF South Dakota		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	42									42
2. First Quarter .....	31									31
3. Second Quarter .....	33									33
4. Third Quarter .....	37									37
5. Current Year	38									38
6. Current Year Member Months	412									412
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	48,966									48,966
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	48,966									48,966
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	84,858									84,858
18. Amount Incurred for Provision of Health Care Services	85,805									85,805

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....48,966



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Tennessee		DURING THE YEAR 2010					NAIC Company Code	12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	330									330
2. First Quarter .....	283									283
3. Second Quarter .....	278									278
4. Third Quarter .....	272									272
5. Current Year	288									288
6. Current Year Member Months	3,373									3,373
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	492,030									492,030
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	492,030									492,030
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	633,236									633,236
18. Amount Incurred for Provision of Health Care Services	626,211									626,211

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....492,030



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	8,023									8,023
2 First Quarter .....	17,379									17,379
3 Second Quarter .....	18,438									18,438
4. Third Quarter .....	20,097									20,097
5. Current Year	21,610									21,610
6 Current Year Member Months	227,603									227,603
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	19,880,713									19,880,713
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	19,880,713									19,880,713
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	15,011,071									15,011,071
18. Amount Incurred for Provision of Health Care Services	15,251,332									15,251,332

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....19,880,713



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Utah		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	56									56
2. First Quarter .....	54									54
3. Second Quarter .....	55									55
4. Third Quarter .....	57									57
5. Current Year	59									59
6. Current Year Member Months	673									673
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	89,993									89,993
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	89,993									89,993
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	117,172									117,172
18. Amount Incurred for Provision of Health Care Services	117,553									117,553

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....89,993



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION  
Envision Insurance Company

2. (LOCATION)

NAIC Group Code 00000 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2010 NAIC Company Code 12747

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	498									498
2 First Quarter .....	61									61
3 Second Quarter .....	63									63
4. Third Quarter .....	63									63
5. Current Year	65									65
6 Current Year Member Months	757									757
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	85,954									85,954
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	85,954									85,954
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	151,494									151,494
18. Amount Incurred for Provision of Health Care Services	126,756									126,756

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....85,954



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION		Envision Insurance Company					2. _____			
NAIC Group Code 00000		BUSINESS IN THE STATE OF Virginia					(LOCATION)			
		DURING THE YEAR 2010					NAIC Company Code 12747			
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	3,852									3,852
2 First Quarter .....	7,884									7,884
3 Second Quarter .....	8,152									8,152
4. Third Quarter .....	8,566									8,566
5. Current Year	8,955									8,955
6 Current Year Member Months	99,495									99,495
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	9,741,542									9,741,542
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	9,741,542									9,741,542
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	7,710,230									7,710,230
18. Amount Incurred for Provision of Health Care Services	7,791,879									7,791,879

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....9,741,542





ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code		00000		BUSINESS IN THE STATE OF Washington		DURING THE YEAR 2010				NAIC Company Code		12747	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
			2	3									
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:													
1. Prior Year .....		282									282		
2 First Quarter .....		219									219		
3 Second Quarter .....		224									224		
4. Third Quarter .....		222									222		
5. Current Year		227									227		
6 Current Year Member Months		2,666									2,666		
Total Member Ambulatory Encounters for Year:													
7. Physician .....		0											
8. Non-Physician .....		0											
9. Total		0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred		0											
11. Number of Inpatient Admissions		0											
12. Health Premiums Written (b).....		352,421									352,421		
13. Life Premiums Direct.....		0											
14. Property/Casualty Premiums Written.....		0											
15. Health Premiums Earned.....		352,421									352,421		
16. Property/Casualty Premiums Earned.....		0											
17. Amount Paid for Provision of Health Care Services .....		489,028									489,028		
18. Amount Incurred for Provision of Health Care Services		482,651									482,651		

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....352,421



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF West Virginia		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	60									60
2 First Quarter .....	52									52
3 Second Quarter .....	56									56
4. Third Quarter .....	58									58
5. Current Year	79									79
6 Current Year Member Months	706									706
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	94,375									94,375
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	94,375									94,375
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	141,712									141,712
18. Amount Incurred for Provision of Health Care Services	147,167									147,167

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....94,375



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Wisconsin		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	2,476									2,476
2. First Quarter .....	372									372
3. Second Quarter .....	350									350
4. Third Quarter .....	353									353
5. Current Year	347									347
6. Current Year Member Months	4,336									4,336
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b).....	484,690									484,690
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	484,690									484,690
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services .....	802,748									802,748
18. Amount Incurred for Provision of Health Care Services	654,991									654,991

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....484,690



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION      Envision Insurance Company      2. \_\_\_\_\_ (LOCATION)

NAIC Group Code      00000      BUSINESS IN THE STATE OF Wyoming	DURING THE YEAR 2010										NAIC Company Code      12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
		2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year .....	8										8
2. First Quarter .....	7										7
3. Second Quarter .....	7										7
4. Third Quarter .....	10										10
5. Current Year	10										10
6. Current Year Member Months	100										100
Total Member Ambulatory Encounters for Year:											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	10,367										10,367
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	10,367										10,367
16. Property/Casualty Premiums Earned.....	0										
17. Amount Paid for Provision of Health Care Services .....	12,288										12,288
18. Amount Incurred for Provision of Health Care Services	13,505										13,505

(a) For health business: number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....10,367



ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Envision Insurance Company 2. (LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Consolidated		DURING THE YEAR 2010				NAIC Company Code		12747
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	37,350	.0	.0	.0	.0	.0	.0	.0	.0	37,350
2 First Quarter .....	71,609	.0	.0	.0	.0	.0	.0	.0	.0	71,609
3 Second Quarter .....	98,688	.0	.0	.0	.0	.0	.0	.0	.0	98,688
4. Third Quarter .....	109,082	.0	.0	.0	.0	.0	.0	.0	.0	109,082
5. Current Year	117,913	0	0	0	0	0	0	0	0	117,913
6 Current Year Member Months	1,123,353	0	0	0	0	0	0	0	0	1,123,353
Total Member Ambulatory Encounters for Year:										
7. Physician .....	0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Non-Physician .....	0	0	0	0	0	0	0	0	0	0
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0
12. Health Premiums Written (b).....	111,443,506	.0	.0	.0	.0	.0	.0	.0	.0	111,443,506
13. Life Premiums Direct.....	0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Property/Casualty Premiums Written.....	0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15. Health Premiums Earned.....	111,443,506	.0	.0	.0	.0	.0	.0	.0	.0	111,443,506
16. Property/Casualty Premiums Earned.....	0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Amount Paid for Provision of Health Care Services .....	94,479,096	.0	.0	.0	.0	.0	.0	.0	.0	94,479,096
18. Amount Incurred for Provision of Health Care Services	96,306,911	0	0	0	0	0	0	0	0	96,306,911

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 111,443,506

## ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

## SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

[illegible]

## ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

## SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

[illegible]

## ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

## SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

[illegible]



## ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

## SCHEDULE S - PART 4

### Reinsurance Ceded To Unauthorized Companies

[illegible]

Schedule S - Part 5

Five-Year Exhibit of Reinsurance Ceded Business  
(000 Omitted)

	1 2010	2 2009	3 2008	4 2007	5 2006
<b>A. OPERATIONS ITEMS</b>					
1. Premiums.....	55,679	21,623	0	0	0
2. Title XVIII-Medicare.....	0	0	0	0	0
3. Title XIX-Medicaid.....	0	0	0	0	0
4. Commissions and reinsurance expense allowance.....		0	0	0	0
5. Total hospital and medical expenses.....	47,918	19,322	0	0	0
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....		0	0	0	0
7. Claims payable.....		0	0	0	0
8. Reinsurance recoverable on paid losses.....	7,789	1,727	0	0	0
9. Experience rating refunds due or unpaid.....		0	0	0	0
10. Commissions and reinsurance expense allowances unpaid.....		0	0	0	0
11. Unauthorized reinsurance offset.....	0	0	0	0	0
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
12. Funds deposited by and withheld from (F).....	0	0	0	0	0
13. Letters of credit (L).....	0	0	0	0	0
14. Trust agreements (T).....	0	0	0	0	0
15. Other (O)	0	0	0	0	0

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	8,090,395		8,090,395
2. Accident and health premiums due and unpaid (Line 15).....	3,007,386		3,007,386
3. Amounts recoverable from reinsurers (Line 16.1).....	7,789,227	(7,789,227)	0
4. Net credit for ceded reinsurance.....	XXX	(31,748,192)	(31,748,192)
5. All other admitted assets (Balance).....	78,120,002		78,120,002
6. Total assets (Line 28)	97,007,010	(39,537,419)	57,469,591
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1).....	3,767,656	420,577	4,188,233
8. Accrued medical incentive pool and bonus payments (Line 2).....	0		0
9. Premiums received in advance (Line 8).....	250,255		250,255
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19).....	39,013,189	(39,013,189)	0
11. Reinsurance in unauthorized companies (Line 20).....	0		0
12. All other liabilities (Balance).....	34,647,438	(944,807)	33,702,631
13. Total liabilities (Line 24).....	77,678,538	(39,537,419)	38,141,119
14. Total capital and surplus (Line 33).....	19,328,472	XXX	19,328,472
15. Total liabilities, capital and surplus (Line 34)	97,007,010	(39,537,419)	57,469,591
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
16. Claims unpaid.....	420,577		
17. Accrued medical incentive pool.....	0		
18. Premiums received in advance .....	0		
19. Reinsurance recoverable on paid losses .....	7,789,227		
20. Other ceded reinsurance recoverables .....	0		
21. Total ceded reinsurance recoverables .....	8,209,804		
22. Premiums receivable .....	0		
23. Funds held under reinsurance treaties with authorized and unauthorized reinsurers .....	39,013,189		
24. Unauthorized reinsurance .....	0		
25. Other ceded reinsurance payables/offsets .....	944,807		
26. Total ceded reinsurance payables/offsets .....	39,957,996		
27. Total net credit for ceded reinsurance	(31,748,192)		

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company

SCHEDULE T – PART 2  
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

		Direct Business Only					
		1	2	3	4	5	6
States, Etc.		Life (Group and individual)	Annuities (Group and individual)	Disability Income (Group and individual)	Long-Term Care (Group and individual)	Deposit-Type Contracts	Totals
1. Alabama .....	AL .....						.0
2. Alaska .....	AK .....						.0
3. Arizona .....	AZ .....						.0
4. Arkansas .....	AR .....						.0
5. California .....	CA .....						.0
6. Colorado .....	CO .....						.0
7. Connecticut .....	CT .....						.0
8. Delaware .....	DE .....						.0
9. District of Columbia .....	DC .....						.0
10. Florida .....	FL .....						.0
11. Georgia .....	GA .....						.0
12. Hawaii .....	HI .....						.0
13. Idaho .....	ID .....						.0
14. Illinois .....	IL .....						.0
15. Indiana .....	IN .....						.0
16. Iowa .....	IA .....						.0
17. Kansas .....	KS .....						.0
18. Kentucky .....	KY .....						.0
19. Louisiana .....	LA .....						.0
20. Maine .....	ME .....						.0
21. Maryland .....	MD .....						.0
22. Massachusetts .....	MA .....						.0
23. Michigan .....	MI .....						.0
24. Minnesota .....	MN .....						.0
25. Mississippi .....	MS .....						.0
26. Missouri .....	MO .....						.0
27. Montana .....	MT .....						.0
28. Nebraska .....	NE .....						.0
29. Nevada .....	NV .....						.0
30. New Hampshire .....	NH .....						.0
31. New Jersey .....	NJ .....						.0
32. New Mexico .....	NM .....						.0
33. New York .....	NY .....						.0
34. North Carolina .....	NC .....						.0
35. North Dakota .....	ND .....						.0
36. Ohio .....	OH .....						.0
37. Oklahoma .....	OK .....						.0
38. Oregon .....	OR .....						.0
39. Pennsylvania .....	PA .....						.0
40. Rhode Island .....	RI .....						.0
41. South Carolina .....	SC .....						.0
42. South Dakota .....	SD .....						.0
43. Tennessee .....	TN .....						.0
44. Texas .....	TX .....						.0
45. Utah .....	UT .....						.0
46. Vermont .....	VT .....						.0
47. Virginia .....	VA .....						.0
48. Washington .....	WA .....						.0
49. West Virginia .....	WV .....						.0
50. Wisconsin .....	WI .....						.0
51. Wyoming .....	WY .....						.0
52. American Samoa .....	AS .....						.0
53. Guam .....	GU .....						.0
54. Puerto Rico .....	PR .....						.0
55. U.S. Virgin Islands .....	VI .....						.0
56. Northern Mariana Islands .....	MP .....						.0
57. Canada .....	CN .....						.0
58. Aggregate Other Alien .....	OT .....						.0
59. Totals		0	0	0	0	0	0

NONE

## 39

## 39

## 39

39

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

Responses

1.

Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?

.....YES.....
2.

Will an actuarial opinion be filed by March 1?

.....YES.....
3.

Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?

.....YES.....
4.

Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?

.....YES.....

APRIL FILING

5.

Will Management's Discussion and Analysis be filed by April 1?

.....YES.....
6.

Will the Supplemental Investment Risks Interrogatories be filed by April 1?

.....YES.....
7.

Will the Accident and Health Policy Experience Exhibit be filed by April 1?

.....YES.....

JUNE FILING

8.

Will an audited financial report be filed by June 1?

.....YES.....
9.

Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?

.....YES.....

AUGUST FILING

10.

Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?

.....YES.....

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

11.

Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?

.....NO.....
12.

Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?

.....NO.....
13.

Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?

.....NO.....
14.

Will the Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?

.....NO.....
15.

Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?

.....NO.....
16.

Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?

.....NO.....
17.

Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?

.....YES.....

APRIL FILING

18.

Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?

.....NO.....
19.

Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?

.....NO.....
20.

Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?

.....NO.....
21.

Will the Supplemental Health Care Exhibit be filed the state of domicile and the NAIC by April 1?

.....NO.....
22.

Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the sate of domicile and the NAIC by April 1?

.....NO.....

AUGUST FILING

23.

Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

.....YES.....

Explanation:

11.

The Company does not offer Medicare Supplement Insurance
12.

The Company does not offer life insurance.
13.

The Company does not write any property/casualty insurance.
14.

The Company has less than 100 shareholders.
15.

The Company does not write life insurance.
16.

The Company does not write life insurance.
18.

The Company does not write long-term care insurance.
19.

The Company does not write life insurance.
20.

The Company does not write any property/casualty insurance.
21.












Exempt Medicare Part D business only.
22.

Exempt Medicare Part D business only.

Bar code:

11.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

	 1 2 7 4 7 2 0 1 0 3 6 0 5 9 0 0 0
12.	 1 2 7 4 7 2 0 1 0 2 0 5 0 0 0 0 0
13.	 1 2 7 4 7 2 0 1 0 2 0 7 0 0 0 0 0
14.	 1 2 7 4 7 2 0 1 0 4 2 0 0 0 0 0 0
15.	 1 2 7 4 7 2 0 1 0 3 7 1 0 0 0 0 0
16.	 1 2 7 4 7 2 0 1 0 3 7 0 0 0 0 0 0
18.	 1 2 7 4 7 2 0 1 0 3 0 6 0 0 0 0 0
19.	 1 2 7 4 7 2 0 1 0 2 1 1 5 9 0 0 0
20.	 1 2 7 4 7 2 0 1 0 2 1 3 0 0 0 0 0
21.	 1 2 7 4 7 2 0 1 0 2 1 6 5 9 0 0 0
22.	 1 2 7 4 7 2 0 1 0 2 1 7 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS

M002 Additional Aggregate Lines for Page 02 Line 25.  
\*ASSETS - Assets

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 – 2)	Net Admitted Assets
2504. Other Assets.....	107	107	0	0
2597. Summary of remaining write-ins for Line 25 from Page 2	107	107	0	0

M016 Additional Aggregate Lines for Page 16 Line 25.  
\*EXNONADMIT - Exhibit of Nonadmitted Assets

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 – Col. 1)
2504. Other Assets.....	107	107	0
2597. Summary of remaining write-ins for Line 25 from Page 16	107	107	0





SUPPLEMENT FOR THE YEAR 2010 OF THE Envision Insurance Company  
MEDICARE PART D COVERAGE SUPPLEMENT

Net of Reinsurance  
(To Be Filed by March 1)

NAIC Group Code

00000

NAIC Company Code

12747

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage.....	55,089,538	XXX	908,482	XXX	55,998,020
1.12 Without Reinsurance Coverage.....		XXX		XXX	0
1.13 Risk-Corridor Payment Adjustments.....		XXX		XXX	0
1.2 Supplemental Benefits.....		XXX		XXX	0
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage .....	1,978,751	XXX		XXX	XXX
2.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
2.2 Supplemental Benefits.....		XXX		XXX	XXX
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage.....		XXX		XXX	XXX
3.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
3.2 Supplemental Benefits.....		XXX		XXX	XXX
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable.....	1,414	XXX		XXX	XXX
4.2 Payable.....		XXX		XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage.....	57,068,290	XXX	908,482	XXX	XXX
5.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
5.13 Risk-Corridor Payment Adjustments.....	1,414	XXX		XXX	XXX
5.2 Supplemental Benefits .....		XXX		XXX	XXX
6. Total Premiums.....	57,069,704	XXX	908,482	XXX	55,998,020
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage.....	53,746,733	XXX	886,338	XXX	54,633,071
7.12 Without Reinsurance Coverage.....		XXX		XXX	0
7.2 Supplemental Benefits.....		XXX		XXX	0
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage .....	(4,760,914)	XXX	106,166	XXX	XXX
8.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
8.2 Supplemental Benefits.....		XXX		XXX	XXX
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage.....		XXX		XXX	XXX
9.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
9.2 Supplemental Benefits.....		XXX		XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage .....	48,985,819	XXX	992,504	XXX	XXX
10.12 Without Reinsurance Coverage.....	0	XXX	0	XXX	XXX
10.2 Supplemental Benefits.....	0	XXX	0	XXX	XXX
11. Total Claims	48,985,819	XXX	992,504	XXX	54,633,071
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid – Net of Reimbursements Applied.....	XXX	77,011,243	XXX	1,269,993	78,281,236
12.2 Reimbursements Received but Not Applied-change.....	XXX		XXX		0
12.3 Reimbursements Receivable-change.....	XXX		XXX		XXX
12.4 Health Care Receivables-change.....	XXX		XXX		XXX
13. Aggregate Policy Reserves-change.....					XXX
14. Expenses Paid.....	(8,222,204)	XXX	(135,592)	XXX	(8,357,796)
15. Expenses Incurred.....	7,215,912	XXX	118,998	XXX	XXX
16. Underwriting Gain/Loss.....	867,973	XXX	(203,020)	XXX	XXX
17. Cash Flow Results	XXX	XXX	XXX	XXX	(68,558,491)

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